

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

ication #:  
 r Name:  
 Name:  
 TO BE TRANSFERRED TO ANG  
 fer accepted.  
 er signature:

CUMENTS (Use back if needed)

CODES:  
 s/Comments:

TO CT: ☐  
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on Name:  
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If more than 150 claims or 10 actions  
 staple additional sheet here